2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 397839

FILED Apr 20, 2009 Secretary of State

Entity Name: MR.	TRANSCO, INC.			
Current Principal Place of Business:		New Principal Place o	New Principal Place of Business:	
3420 S. ORANGE AVE ORLANDO, FL 328066128			715 N. HIGHWAY 17-92 LONGWOOD, FL 32750	
Current Mailing Address:		New Mailing Address:	New Mailing Address:	
3420 S. ORANGE AV ORLANDO, FL 3280		715 N. HIGHWAY 17-92 LONGWOOD, FL 3275		
FEI Number: 59-139999	1 FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address	of Current Registered Agent:	Name and Address of	New Registered Agent:	
THOMPSON, CARR 4012 SHADY OAK C LONGWOOD, FL LAKE MARY, FL 327	T.	THOMPSON, CARROL 4012 SHADY OAK CT. LAKE MARY, FL 32746		
The above named er in the State of Florida	ntity submits this statement for the $ ho \iota$ a.	ırpose of changing its registered	office or registered agent, or both,	
SIGNATURE: CARROLL THOMPSON			04/20/2009	
Elec	ctronic Signature of Registered Ager	nt	Date	
Election Campaign Fina	ncing Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
	() Delete DN, CARROLL DY OAK CT. RY, FL	Title: (Name: Address: City-St-Zip:	()Change ()Addition	
	() Delete DN, YOLANDA DY OAK CT. RY, FL	Title: (Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARROLL THOMPSON Ρ 04/20/2009